Form 8 SLFRF City of Norman

Waiver of Qualified Contract

Development Name:
I, (please print name), hereby Certify that I have read the Waiver of Qualified Contract statement below and understand what the City of Norman has determined constitutes a Waiver of Qualified Contract.
The undersigned (please print) hereby Certifies that,
☐ I waive my right to a Qualified Contract.
I hereby Certify, under penalty of law, and with the knowledge that this information may be verified, that the information submitted is true and accurate.
IN WITNESS THEREOF, I have set my hand this day of, 2023.
Signature of Non-Profit, General Partner/Managing Member (or Principal thereof)
Title of Officer if General Partner/Managing Member is a corporation.
The Waiver of Qualified Contract Affidavit was acknowledged before me this
day of, 2023, by known to me to be
the person described herein and who executed the foregoing instrument and
acknowledge that he/she executed the same as his/her free and voluntary act of deed.
Notary Public
My commission Expires: